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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	Write the name that is o		Patricia	
	pictı exai	r government-issued ure identification (for mple, your driver's	First name	First name
license (nse or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.		Cerda	
			Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ude your married or den names.		
3.	you nun Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-2279	

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Debtor 1 Patricia Cerda

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
	Where you live		If Debtor 2 lives at a different address:
5.	Where you live	1924 N. Raynor Avenue Crest Hill, IL 60403 Number, Street, City, State & ZIP Code Will County If your mailing address is different from the one above, fill it in here. Note that the court will send any	Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this
		notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code	mailing address. Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Patricia Cerda

ar	Tell the Court About	Your B	ankruptcy Ca	se			
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	■ Cl	hapter 7				
		☐ Cl	hapter 11				
		☐ CI	hapter 12				
		☐ CI	hapter 13				
3.	How you will pay the fee		about how yo	u may pay. Typ attorney is subr	ically, if you are paying the	e fee yourself, you may pay wit	in your local court for more details th cash, cashier's check, or money bay with a credit card or check with
					allments. If you choose the s (Official Form 103A).	nis option, sign and attach the	Application for Individuals to Pay
							or Chapter 7. By law, a judge may, 150% of the official poverty line that
			applies to you	ur family size an	id you are unable to pay th		noose this option, you must fill out
			по друговис	nn to mave the c	mapler 7 Tilling Fee Walve	or (Omeian Form 100b) and me	it with your polition.
).	Have you filed for bankruptcy within the	■ No).				
	last 8 years?	☐ Ye	es.				
			District		When	Case nu	mber
			District		When	Case nu	mber
			District		When	Case nu	mber
10.	Are any bankruptcy	■ No	<u> </u>				
	cases pending or being filed by a spouse who is	☐ Ye					
	not filing this case with you, or by a business partner, or by an affiliate?	— те	55.				
			Debtor			Relationsh	hip to you
			District		When	Case num	nber, if known
			Debtor			Relationsh	hip to you
			District		When	Case num	nber, if known
11.	Do you rent your residence?	■ No	Go to l	ne 12.			
		☐ Ye	es. Has yo	ur landlord obta	nined an eviction judgment	against you and do you want	to stay in your residence?
				No. Go to line	12.		
				Yes. Fill out Initial bankruptcy pet		viction Judgment Against You	(Form 101A) and file it with this

Debtor 1	Patricia Cerda	Document	Page 4 of 57	Case number (if known)	

ar	Report About Any Bu	sinesses `	You Own	as a Sole Proprie	tor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to I	Part 4.		
		☐ Yes.	Name	and location of bus	siness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any		
	If you have more than one sole proprietorship, use a		Numbe	er, Street, City, Stat	te & ZIP Code	
	separate sheet and attach it to this petition.		Check	the appropriate bo	ox to describe your business:	
	,				ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				None of the above	e	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate lines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure U.S.C. 1116(1)(B).			
	For a definition of small	No.	I am no	ot filing under Chap	oter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fil Code.	ing under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am fil	ing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Pari	t 4: Report if You Own or	Have Anv	Hazardoi	us Property or An	y Property That Needs Immediate Attention	
	Do you own or have any		Tiuzui uo	uo i roporty oi 7	, roperty man resuct miniounate retention	
14.	property that poses or is alleged to pose a threat of imminent and	■ No. □ Yes.	What is tl	he hazard?		
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			ate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?		
					Number, Street, City, State & Zip Code	

Debtor 1 Patricia Cerda Document Page 5 of 57

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Patricia Cerda		Docume		Case number (if known)	
Part	6: Answer These Ques	tions for R	eporting Purposes			
16.	What kind of debts do you have?	16a.		onsumer debts? Consumer de onal, family, or household pur		S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.		usiness debts? Business deb stment or through the operation		
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you or	we that are not consumer deb	ts or business debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	7. Go to line 18.		
Do you estimate that after any exempt property is excluded and		■ Yes.		Oo you estimate that after any allable to distribute to unsecur		ded and administrative expenses
	administrative expenses		No			
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes			1 U.S.C. § 101(8) as "incurred by an incurred to obtain investment. 2 25,001-50,000 1 50,001-100,000 1 More than100,000 1 \$500,000,001 - \$1 billion 1 \$1,000,000,001 - \$50 billion 1 \$10,000,000,001 - \$50 billion 1 \$10,000,000,001 - \$10 billion 1 \$10,000,000,000 - \$10 billion
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1 □ 200-9	99	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	□ 50	,001-100,000
19.	How much do you estimate your assets to be worth?	□ \$100,	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	\$1,000,001 - \$10 mi \$10,000,001 - \$50 mi \$50,000,001 - \$100 \$100,000,001 - \$500	million	,000,000,001 - \$10 billion 0,000,000,001 - \$50 billion
20.	How much do you estimate your liabilities to be?	□ \$100,	50,000 001 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 mi □ \$10,000,001 - \$50 i □ \$50,000,001 - \$100 □ \$100,000,001 - \$500	million	,000,000,001 - \$10 billion 0,000,000,001 - \$50 billion
Part	7: Sign Below					
For	you	I have ex	camined this petition, and I dec	lare under penalty of perjury th	hat the information provi	ded is true and correct.
			chosen to file under Chapter 7, tates Code. I understand the re			
			rney represents me and I did n nt, I have obtained and read the			y to help me fill out this
		I request	relief in accordance with the c	hapter of title 11, United State	es Code, specified in this	petition.
		bankrupt and 357	cy case can result in fines up to			
		Patricia		Signat	ure of Debtor 2	
		Executed	d on April 21, 2017 MM / DD / YYYY	Execut	ted on MM / DD / YYY	<u>Y</u>

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Debtor 1 Patricia Cerda Page 7 01 57

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	D. Cummings Attorney for Debtor	Date	April 21, 2017 MM / DD / YYYY
Ronald D.	Cummings		
Printed name			
Law office	es of Ronald D. Cummings		
Firm name			
22600 Dee	er Path Lane		
Plainfield,	IL 60544		
Number, Street,	City, State & ZIP Code		
Contact phone	815 782-4844	Email address	bankruptcylawyer@sbcglobal.net
6195972			
Bar number & S	tato		

		Docume	ent Page 8 of 57	
Fill in this infor	mation to identify your	case:		
Debtor 1	Patricia Cerda			
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
if known)				Check if this is an
				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value of	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	15,000.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	15,000.00
Paı	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	17,137.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	36,012.79
	Your total liabilities	\$	53,149.79
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,190.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,176.00
Pai	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Case number (if known) Debtor 1 Patricia Cerda

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

3,745.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

		Document	Page 10 of 57		
Fill in this info	ormation to identify your	r case and this filing:			
Debtor 1	Patricia Cerda				
DCDIOI 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS		
	, .,				
Case number			_		☐ Check if this is an
					amended filing
Official F	orm 106A/B				
_					
<u>scneau</u>	<u>lle A/B: Prop</u>	perty			12/15
hink it fits best. nformation. If m Answer every qu	Be as complete and accur ore space is needed, attach estion.	be items. List an asset only once. It ate as possible. If two married peop on a separate sheet to this form. On the g, Land, or Other Real Estate You C	ole are filing together, both a the top of any additional pag	are equally responsible for su	pplying correct
Part I. Descrit	be Each Residence, Buildin	g, Land, of Other Real Estate fou C	will of have all litterest in		
. Do you own o	r have any legal or equitab	le interest in any residence, buildin	g, land, or similar property?		
■ No. Go to F	Part 2.				
	e is the property?				
	- 12 1112 property :				
Part 2: Describ	e Your Vehicles				
B. Cars, vans, □ No ■ Yes	trucks, tractors, sport u	itility vehicles, motorcycles			
	ahaya.			Do not deduct secured cl	aims or exemptions. Put
3.1 Make:	chevy Malibu	Who has an interest in	:he property? Check one	the amount of any secure	ed claims on Schedule D:
Model:		Debtor 1 only		Creditors Who Have Clair	ms Secured by Property.
Year:	2013 nate mileage:	Debtor 2 only	D = = 1.	Current value of the entire property?	Current value of the portion you own?
Other info		Debtor 1 and Debtor 2 At least one of the de	•	entire property:	portion you own:
	Jimadon.	At least one of the de	olois and another		
		☐ Check if this is com	munity property	\$13,000.00	\$13,000.00
		(see instructions)			
Examples: Bo No Yes Add the do pages you Part 3: Describ	pats, trailers, motors, personal llar value of the portion have attached for Part 2	ATVs and other recreational velsonal watercraft, fishing vessels, so you own for all of your entries but white that number here	from Part 2, including an	ny entries for	\$13,000.00 Current value of the cortion you own?
					Do not deduct secured
					claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Debtor 1		d 04/21/17 Entered 04 ocument Page 11 of	4/21/17 08:59:53 57 Case number (if known)	Desc Main
_	Describe		- Cacc	
	misc used furniture and	personal items		\$1,000.00
■ No	nics ples: Televisions and radios; audio, video, stereo, including cell phones, cameras, media playe Describe		printers, scanners; music or	ollections; electronic devices
Examp ■ No	ibles of value bles: Antiques and figurines; paintings, prints, or o other collections, memorabilia, collectibles . Describe	other artwork; books, pictures, or oth	ner art objects; stamp, coin,	or baseball card collections;
Examp No	nent for sports and hobbies bles: Sports, photographic, exercise, and other ho musical instruments Describe	bby equipment; bicycles, pool table	es, golf clubs, skis; canoes a	and kayaks; carpentry tools;
■ No	ms apples: Pistols, rifles, shotguns, ammunition, and re Describe	elated equipment		
□ No	es nples: Everyday clothes, furs, leather coats, desig Describe	ner wear, shoes, accessories		
	ordinary necessary cloth	ning		Unknow
□ No	ples: Everyday jewelry, costume jewelry, engage Describe	ement rings, wedding rings, heirloon	n jewelry, watches, gems, g	
	misc jewelry			\$500.00
Exam No Yes. 14. Any or	arm animals apples: Dogs, cats, birds, horses Describe ther personal and household items you did not. Give specific information	ot already list, including any heal	∖th aids you did not list	
	the dollar value of all of your entries from Par Part 3. Write that number here		es you have attached	\$1,500.00
	escribe Your Financial Assets			
Do you o	wn or have any legal or equitable interest in a	ny of the following?		Current value of the

portion you own?
Do not deduct secured claims or exemptions.

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Case number (if known) Document Debtor 1 Patricia Cerda 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes. 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... checking **Chase Bank** \$500.00 17.1. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and ioint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No $\hfill \square$ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Official Form 106A/B Schedule A/B: Property page 3

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☐ Yes. Give specific information about them...

■ No

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De	ebtor 1	Patricia	Cerda		Document	Page 13 of 57 Case number (if known)	
27.	Examp ■ No	oles: Buildir	ises, and other ng permits, excludific information a	sive licenses	ngibles , cooperative association	n holdings, liquor licenses, professional licens	es
М	onev or	property o	wed to you?				Current value of the
	, ,	,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref ■ No	funds owe	d to you				
	☐ Yes.	Give speci	fic information al	oout them, inc	cluding whether you alre	ady filed the returns and the tax years	
29.	Examp		ue or lump sum		usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
30.		oles: Unpaid	omeone owes y d wages, disabili its; unpaid loans	ty insurance		efits, sick pay, vacation pay, workers' comper	nsation, Social Security
	☐ Yes.	Give spec	ific information				
31.			ance policies , disability, or life	e insurance; ł	nealth savings account (HSA); credit, homeowner's, or renter's insurar	nce
	☐ Yes.	Name the i		any of each popany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
32.	If you a someo	are the ben one has die	eficiary of a livin		someone who has die t proceeds from a life in	ed surance policy, or are currently entitled to rece	eive property because
33.	Examp ■ No	oles: Accide			you have filed a lawsui surance claims, or rights	it or made a demand for payment s to sue	
34.	■ No	_	and unliquidat	ed claims of	every nature, includin	g counterclaims of the debtor and rights to	set off claims
35.	■ No		ets you did not	already list			
36	6. Add t	he dollar v	alue of all of yo		om Part 4, including a	ny entries for pages you have attached	\$500.00
Pa	art 5: Des	scribe Any I	Business-Related	Property You	Own or Have an Interest	In. List any real estate in Part 1.	
					in any business-related p	-	
	■ No. Go		,		,		
	☐ Yes. G	Go to line 38.					

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Case number (if known) Document Debtor 1 Patricia Cerda Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$13.000.00 57. Part 3: Total personal and household items, line 15 \$1,500.00 Part 4: Total financial assets, line 36 \$500.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 \$0.00 61.

\$15,000.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$15,000.00

\$15,000.00

			Document	F	Page 15 of 57	_	
Fil	l in this infor	mation to identify your	case:				
De	btor 1	Patricia Cerda					
Do	btor 2	First Name	Middle Name	L	Last Name		
	ouse if, filing)	First Name	Middle Name	L	ast Name		
Un	ited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF	ILLIN	OIS		
Ca	se number						
	nown)						Check if this is an amended filing
\bigcirc	fficial Ea	orm 106C					
					F		
<u> </u>	cneaui	e C: The Pro	pperty You Cla	um	as Exempt		4/16
the nee cas	property you I ded, fill out ar e number (if k	isted on Schedule A/B: Find attach to this page as in nown).	Property (Official Form 106A/B) many copies of Part 2: Addition	as yo nal Pa	ther, both are equally responsible for bur source, list the property that younge as necessary. On the top of any	ı claim as ex / additional p	tempt. If more space is pages, write your name and
spe any fun exe	ecific dollar and applicable s ds—may be usermation to a p	mount as exempt. Alter tatutory limit. Some exe unlimited in dollar amou	natively, you may claim the f emptions—such as those for int. However, if you claim an	ull fa heal exer	ount of the exemption you claim. ir market value of the property be th aids, rights to receive certain l nption of 100% of fair market valudetermined to exceed that amoun	eing exemp benefits, an ue under a l	ted up to the amount of d tax-exempt retirement aw that limits the
Pa	rt 1: Identi	fy the Property You Cla	im as Exempt				
1.	Which set o	f exemptions are you c	aiming? Check one only, even	n if yo	our spouse is filing with you.		
	You are c	laiming state and federal	nonbankruptcy exemptions.	11 U.S	S.C. § 522(b)(3)		
	☐ You are c	laiming federal exemption	ns. 11 U.S.C. § 522(b)(2)				
2.	For any pro	perty you list on <i>Sched</i>	ule A/B that you claim as exe	empt,	fill in the information below.		
		ion of the property and line		Am	ount of the exemption you claim	Specific la	ws that allow exemption
	Schedule A/B	that lists this property	portion you own Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	misc used	furniture and persor	al \$1,000.00		\$1,000.00	735 ILC	S 5/12-1001(b)
		hedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
	ordinary n	ecessary clothing	Unknown		100%	735 ILC	S 5/12-1001(a)
	Line from Sc	hedule A/B: 11.1		_			
					100% of fair market value, up to any applicable statutory limit		
	misc jewel	ry hedule A/B: 12.1	\$500.00		\$500.00	735 ILC	S 5/12-1001(b)
	Line nom de	neddie AVB. 1211			100% of fair market value, up to any applicable statutory limit		
	_	Chase Bank	\$500.00		\$500.00	735 ILC	S 5/12-1001(b)
	Line Irom Sc	hedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit		
3.	(Subject to a	djustment on 4/01/19 and	, ,	ases fi	iled on or after the date of adjustme	,	

☐ NO

Official Form 106C

☐ Yes

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Debtor 1 Patricia Cerda

Case 17-1	L2497 Doc	1 Filed 04/21/1 Document	7 Entere	d 04/21/17 08:59	9:53 Desc M	lain
Fill in this information to ic	lentify your case:		T TAKE.			
Debtor 1 Patrici	a Cerda					
First Name		Middle Name	Last Name			
Debtor 2 (Spouse if, filling) First Name		Middle Name	Last Name			
United States Bankruptcy Co	ourt for the: NOI	RTHERN DISTRICT OF I	LLINOIS			
Case number(if known)					_	if this is an led filing
Official Form 106D Schedule D: Cre	editors Who	o Have Claims	s Secure	d by Property		12/15
Be as complete and accurate a s needed, copy the Additional number (if known).						
1. Do any creditors have claims	s secured by your pr	operty?				
☐ No. Check this box ar	nd submit this form	to the court with your oth	er schedules. Y	ou have nothing else to re	eport on this form.	
Yes. Fill in all of the in	nformation below	•		· ·	•	
Part 1: List All Secured				Column A C	Column B	Column C
2. List all secured claims. If a of for each claim. If more than one much as possible, list the claims	creditor has a particu	ular claim, list the other credit	ors in Part 2. As	Amount of claim Do not deduct the	/alue of collateral hat supports this	Unsecured portion If any
2.1 Ally Financial	Descri	be the property that secure	s the claim:	\$17,137.00	\$13,000.00	\$4,137.00
Creditor's Name		chevy Malibu			***************************************	<u> </u>
P.o. Box 380901 Bloomington, MN 5	apply.	he date you file, the claim i	S: Check all that			
Number, Street, City, State & 2	Zip Code Unli	iquidated				
Who owes the debt? Check of	-1	of lien. Check all that apply	y.			
■ Debtor 1 only □ Debtor 2 only		agreement you made (such a r loan)	as mortgage or se	cured		
Debtor 1 and Debtor 2 only	☐ Stat	tutory lien (such as tax lien, n	nechanic's lien)			
☐ At least one of the debtors ar		gment lien from a lawsuit	,			
☐ Check if this claim relates community debt	to a Oth	er (including a right to offset)				
	ened 09/13					

Add the dollar value of your entries in Column A on this page. Write that number here: \$17,137.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$17,137.00

Last 4 digits of account number

Part 2: List Others to Be Notified for a Debt That You Already Listed

Last Active

Date debt was incurred 3/31/17

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

3253

00	100 IT IZ-101 E	Document Document	Page 18	3 of 57	Desc Main
Fill in this inforr	mation to identify your				
Debtor 1	Patricia Cerda				
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle Name	Loot Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Forn	n 106F/F				
		ho Have Unsecured	Claims		12/15
				Part 2 for creditors with NONDRI	IORITY claims. List the other party to
eft. Attach the Cor ame and case nur	ntinuation Page to this pag	e. If you have no information to rep			nber the entries in the boxes on the of any additional pages, write your
	ors have priority unsecure				
No. Go to F	• •	a ciamis agamst you.			
Yes.	alt Z.				
	II of Your NONPRIORIT	Y Unsecured Claims			
		cured claims against you?			
_		art. Submit this form to the court with	vour other sche	dules	
_	ve nothing to report in this p	art. Submit this form to the court with	your other some	aules.	
Yes.					
unsecured clair	m, list the creditor separately	aims in the alphabetical order of the y for each claim. For each claim listed, ist the other creditors in Part 3.If you h	, identify what t	ype of claim it is. Do not list claims	s already included in Part 1. If more
					Total claim
4.1 Anthon	y Lombardi DDS	Last 4 digits of acco	ount number	0023	\$116.95
	y Creditor's Name	When we the debt	!		
	neodore Street L 60435	When was the debt	incurrea?		
	treet City State Zlp Code	As of the date you f	ile, the claim i	s: Check all that apply	
Who incu	rred the debt? Check one.				
Debtor	1 only	☐ Contingent			
☐ Debtor	2 only	☐ Unliquidated			
☐ Debtor	1 and Debtor 2 only	☐ Disputed			
☐ At leas	st one of the debtors and and		ITY unsecured	I claim:	
	if this claim is for a com	_			
debt Is the clai	im subject to offset?	☐ Obligations arisin report as priority clair		ration agreement or divorce that y	ou did not
■ No	,			g plans, and other similar debts	
☐ Yes		_			
□ res		Other. Specify			

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Debtor 1 Patricia Cerda Case number (if know) 4.2 \$29.32 Anthony Lombardi DDS Last 4 digits of account number 0102 Nonpriority Creditor's Name 3011 Theodore Street When was the debt incurred? Joliet, IL 60435 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 **Associated Radiologists of Joliet** 4091 Last 4 digits of account number \$57.00 Nonpriority Creditor's Name 6801 W. 73rd Street, #637 When was the debt incurred? Bedford Park, IL 60499-0637 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify **Associated Radiologists of Joliet** 4.4 Last 4 digits of account number 3841 \$79.40 Nonpriority Creditor's Name 6801 W. 73rd Street, #637 When was the debt incurred? Bedford Park, IL 60499-0637 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: lacksquare At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

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Debtor 1 Patricia Cerda Case number (if know) 4.5 **ATI Physical Therapy** \$304.38 Last 4 digits of account number 5108 Nonpriority Creditor's Name **Attn: Collections** When was the debt incurred? P.O. Box 371863 Pittsburgh, PA 15250 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Belden Jewelers/Sterling Jewelers, 0430 \$2,432.00 4.6 Last 4 digits of account number Inc Nonpriority Creditor's Name Opened 10/14 Last Active Attn: Bankruptcy Po Box 1799 When was the debt incurred? 1/30/17 Akron, OH 44309 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.7 **Cab Services Inc** Last 4 digits of account number 4EMR \$292.68 Nonpriority Creditor's Name When was the debt incurred? 90 Barney Drive Joliet, IL 60435 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

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Debtor 1 Patricia Cerda Case number (if know) 4.8 \$829.00 Capital One Last 4 digits of account number 8068 Nonpriority Creditor's Name Attn: General Opened 10/14 Last Active Correspondence/Bankruptcy When was the debt incurred? 2/10/17 Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.9 **Capital One** \$785.00 Last 4 digits of account number 7237 Nonpriority Creditor's Name Opened 08/12 Last Active Attn: General Correspondence/Bankruptcy When was the debt incurred? 2/10/17 Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.1 Center for Brain & Nerve Disorders 3842 \$281.91 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 924 When was the debt incurred? Bolingbrook, IL 60440 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

T Yes

Other. Specify

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Document Page 22 of 57 Debtor 1 Patricia Cerda Case number (if know) 4.1 **Chase Card** 4169 \$2,059.00 Last 4 digits of account number Nonpriority Creditor's Name **Attn: Correspondence Dept** Opened 06/15 Last Active Po Box 15298 When was the debt incurred? 2/12/17 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.1 **Collection Professionals** 4439 \$692.25 Last 4 digits of account number 2 Nonpriority Creditor's Name 723 First Street When was the debt incurred? La Salle, IL 61301-2535 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 Comenity Bank/Express 7174 \$651.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Attn: Bankruptcy Opened 07/14 Last Active Po Box 182125 When was the debt incurred? 2/03/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another

☐ Yes

■ No

debt

 \square Obligations arising out of a separation agreement or divorce that you did not

lacksquare Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

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Case number (if know) Debtor 1 Patricia Cerda 4.1 Comenity Bank/nwyrk&co 5692 \$1,894.00 Last 4 digits of account number 4 Nonpriority Creditor's Name Opened 05/14 Last Active Po Box 182789 When was the debt incurred? 2/03/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes Comenity Bank/Victoria Secret 2259 \$1,581.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 08/14 Last Active Attn: Bankruptcy 2/03/17 Po Box 182125 When was the debt incurred? Columbus, OH 43218 As of the date you file, the claim is: Check all that apply Number Street City State ZIp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 \$769.00 Comenitybank/meijer 2667 Last 4 digits of account number 6 Nonpriority Creditor's Name **Comenity Bank** Opened 4/07/16 Last Active Po Box 182125 When was the debt incurred? 2/11/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

T Yes

■ Other. Specify Charge Account

Document Page 24 of 57 Case number (if know) Debtor 1 Patricia Cerda 4.1 \$49.00 **Comprehensive Pathology Services** 1786 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 26570 Network Place Chicago, IL 60673-1265 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 **Discover Financial** 3486 \$1,214.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 07/14 Last Active Po Box 3025 When was the debt incurred? 2/24/17 New Albany, OH 43054 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.1 **EM Strategies LTD** 1582 \$242.30 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 487 When was the debt incurred? Bedford Park, IL 60499-0487 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify

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Document Page 25 of 57 Debtor 1 Patricia Cerda Case number (if know) 4.2 Ent Surgical Consultants Ltd. 4EMR \$292.68 Last 4 digits of account number 0 Nonpriority Creditor's Name 2201 Glenwood Avenue When was the debt incurred? Joliet, IL 60435 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.2 **ERC/Enhanced Recovery Corp** 5923 \$2,749.00 Last 4 digits of account number Nonpriority Creditor's Name 8014 Bayberry Rd When was the debt incurred? **Opened 04/16** Jacksonville, FL 32256 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Tmobile ☐ Yes 4.2 ICS/Illinois Collection Service \$203.00 5728 Last 4 digits of account number Nonpriority Creditor's Name Po Box 1010 When was the debt incurred? **Opened 05/16** Tinley Park, IL 60477 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

Official Form 106 E/F

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

■ Other. Specify Service C

 \square Obligations arising out of a separation agreement or divorce that you did not

Collection Attorney Joliet Radiological

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

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Case number (if know)

Debtor 1 Patricia Cerda 4.2 **ICS/Illinois Collection Service** 2244 \$97.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Po Box 1010 When was the debt incurred? **Opened 07/14** Tinley Park, IL 60477 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Joliet Radiological** ☐ Yes Other. Specify Service C 4.2 Kohls/Capital One \$673.00 4736 Last 4 digits of account number Nonpriority Creditor's Name **Kohls Credit** Opened 10/14 Last Active Po Box 3043 When was the debt incurred? 2/13/17 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not debt report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.2 1264 **Loyola University Medical Center** \$419.67 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 3021 Milwaukee, WI 53201-3021 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Case number (if know)

Debtor 1 Patricia Cerda 4.2 Med Business Bureau 2473 \$270.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 1460 Renaissance Dr #400 When was the debt incurred? **Opened 10/13** Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Allied Anesthesia** ☐ Yes Other. Specify Assoc. 4.2 \$79.00 Med Business Bureau 8613 Last 4 digits of account number Nonpriority Creditor's Name 1460 Renaissance Dr #400 When was the debt incurred? **Opened 10/13** Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Allied Anesthesia** ☐ Yes Other. Specify Assoc. 4.2 Medicalrecov 3997 \$602.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 2250 E Devon Ave Ste 352 When was the debt incurred? Opened 7/07/16 Des Plaines, IL 60018 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Silver Cross Hospital Hs ☐ Yes

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Document Page 28 of 57 Case number (if know) Debtor 1 Patricia Cerda 4.2 MM Ahsan SC 3375 \$2,287.24 Last 4 digits of account number 9 Nonpriority Creditor's Name 1640 Willow Circle Drive When was the debt incurred? Joliet, IL 60435 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.3 OneMain 4153 \$7,982.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 10/16 Last Active Attn: Bankruptcy 601 Nw 2nd St When was the debt incurred? 2/13/17 Evansville, IN 47708 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Note Loan 4.3 **Optima Recovery Servic** 5885 \$450.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 08/16 Last Active 6215 Kingston Pike Ste A When was the debt incurred? 3/07/17 Knoxville, TN 37950 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

lacksquare Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Anesthesiology Assocs

Collection Attorney American

Is the claim subject to offset?

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Debtor 1 Patricia Cerda Case number (if know) 4.3 **Receivables Performance Mgmt** 7609 \$2,181.00 Last 4 digits of account number 2 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? Opened 11/18/16 Po Box 1548 Lynnwood, WA 98036 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Collection Attorney Sprint 4.3 Synchrony Bank/Amazon 8547 \$425.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Attn: Bankruptcy Opened 08/15 Last Active Po Box 956060 When was the debt incurred? 2/03/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.3 Synchrony Bank/TJX 1130 \$312.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 06/15 Last Active Po Box 956060 When was the debt incurred? 2/27/17 Orlando, FL 32896 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes

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Debtor 1 Patricia Cerda Case number (if know) 4.3 Synchrony Bank/Walmart 2861 \$1,440.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Attn: Bankruptcy Opened 10/14 Last Active Po Box 956060 When was the debt incurred? 2/13/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.3 **Target** 4516 \$554.00 Last 4 digits of account number 6 Nonpriority Creditor's Name C/O Financial & Retail Srvs Opened 10/14 Last Active Mailstopn BT POB 9475 When was the debt incurred? 2/03/17 Minneapolis, MN 55440 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.3 United Recovery Service, LLC 7989 \$368.01 Last 4 digits of account number Nonpriority Creditor's Name 18525 Torrence Avenue When was the debt incurred? Suite C-6 Lansing, IL 60438 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Case number (if know) Debtor 1 Patricia Cerda

Bank/Macy's	Last 4 digits of account number	4050	\$269
Nonpriority Creditor's Name		0 140/44 1 4 1	
Attn: Bankruptcy	MI	Opened 10/14 Last Active	
Po Box 8053	When was the debt incurred?	12/17/16	
Mason, OH 45040 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	,		
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□Yes	■ Other. Specify Charge Acc	count	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				1	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				7	Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	• • • •	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	36,012.79
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	36,012.79

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Fill in this infor	mation to identify your	case:			
Debtor 1	Patricia Cerda				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number				_	
(if known)					Check if this is an

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code					State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

		Docume	ent Page 33 d	ot 57	
Fill in this	s information to identify your	case:			
Debtor 1	Detricio Cordo				
Deptor i	Patricia Cerda First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fill	ing) First Name	Middle Name	Last Name		
Linitad Cta	otoo Donkrintov Court for the	NORTHERN DISTRICT	OFILLINOIS		
United Sta	ates Bankruptcy Court for the:	- NORTHERN DISTRICT	OF ILLINOIS		
Case num	ber				
(if known)					☐ Check if this is an
					amended filing
o	. =				
Officia	I Form 106H				
Sched	dule H: Your Cod	ebtors			12/15
our name	e and case number (if known you have any codebtors? (If). Answer every question			p of any Additional Pages, write
_					
■ No					
☐ Ye	S				
Arizor 	thin the last 8 years, have you ha, California, Idaho, Louisiana				ty states and territories include)
☐ Ye	s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
		, 0	,		
in line Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed t 06G). Use Schedule D	ng with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt
	Name, Number, Street, City, State and Z	IP Code		Check all schedul	
3.1	Name			D Schedule D, lir	ne
	Name			☐ Schedule E/F,	
				☐ Schedule G, lir	ne
-	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, lir	ne.
0.2	Name			Schedule E/F,	
				☐ Schedule G, lir	
					<u> </u>
	Number Street City	State	ZIP Code		
	Oity	Jiaic	ZIF COUR		

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							•				
Fill	in this information to	o identify your c	ase:								
De	btor 1	Patricia Cer	da			_					
1 -	btor 2 ouse, if filing)					_					
Un	ited States Bankrup	tcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_					
(If k	se number						□ Ar		ed filing ent showing	g postpetition	
<u>O</u>	fficial Form	<u> 1061</u>					M	M / DD/ Y	YYY		
S	chedule I: `	Your Inc	ome								12/1
spo	ruse. If you are sep ich a separate shee rt 1: Describe	arated and you et to this form. e Employment	are married and not filir ir spouse is not filing wi On the top of any addition	th you, do not inclu onal pages, write yo	de infor	mati	on about	your spo mber (if	ouse. If mo known). A	ore space is nswer every	needed,
	information.			Debtor 1				Debtor 2 or non-filing spouse			
	If you have more than one job, attach a separate page with information about additional		Employment status Employed Not employed				☐ Employed ☐ Not employed				
	employers.		Occupation								
	Include part-time, seasonal, or self-employed work.		Employer's name								
	Occupation may in or homemaker, if		Employer's address								
			How long employed ti	nere?				_			
Pa	rt 2: Give Det	tails About Mor	nthly Income								
	imate monthly inco		ate you file this form. If y	you have nothing to re	eport for	any	line, write	\$0 in the	space. Inc	lude your no	n-filing
•	ou or your non-filing e space, attach a se	•	ore than one employer, co	embine the informatio	n for all e	empl	oyers for t	hat perso	on on the lir	nes below. If	you need
							For Deb	tor 1		otor 2 or ng spouse	
2.	List monthly gro deductions). If no	ss wages, sala ot paid monthly,	ry, and commissions (becalculate what the month)	efore all payroll y wage would be.	2.	\$		0.00	\$	N/A	
3.	Estimate and list	t monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	-
4.	Calculate gross	Income. Add lir	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

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Debtor 1		Patricia Cerda	-	Case	number (if known)				
					Debtor 1	non-fi	For Debtor 2 or non-filing spouse		
	Сор	y line 4 here	4.	\$_	0.00	\$	N/A	-	
5.	List	all payroll deductions:							
	5a. 5b. 5c. 5d. 5e. 5f.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations	5a. 5b. 5c. 5d. 5e. 5f.	\$_ \$_ \$_ \$_	0.00 0.00 0.00 0.00 0.00 0.00	\$	N/A N/A N/A N/A N/A	- - - -	
	5g.	Union dues	5g.	\$_	0.00	\$	N/A	-	
	5h.	Other deductions. Specify:	5h.+	_		+ \$	N/A	-	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$	N/A	-	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	N/A	-	
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8c. 8d. 8e.	\$_ \$_ \$_ \$_	0.00 0.00 1,790.00 0.00	\$ \$ \$ \$	N/A N/A N/A N/A N/A	-	
	8n.	Other monthly income. Specify: severance	_ 8n.+	·	1,400.00	+ \$	N/A	-	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3,190.00	\$	N/A	<u>\</u>	
10.		•	10. \$		3,190.00 + \$		N/A = \$	3,190.00	
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L						
11.	State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00								
12.	2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined								
4.5	_		_					y income	
13.	Do y	ou expect an increase or decrease within the year after you file this form No. Yes. Explain:	7						

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	n this information to ide	ontify your case:			1			
		eritiry your case.						
Debt	or 1 Patric	a Cerda				k if this is:		
Debt	tor 2					An amended filing A supplement show	wing postpetition chapter	
(Spo	ouse, if filing)						the following date:	
Unite	ed States Bankruptcy Cou	rt for the: NOR1	MM / DD / YYYY					
Case	e number							
(If kr	nown)							
Of	ficial Form 10)6J						
Sc	hedule J: Y	our Expe	nses				12/1	
Be a info	as complete and accu rmation. If more space nber (if known). Answ	rate as possible is needed, at ver every questi	e. If two married people ar					
Part 1.	1: Describe Your Is this a joint case?	Household						
	No. Go to line 2.							
	Yes. Does Debtor	2 live in a sepa	rate household?					
	□ No □ Yes Debto	or 2 must file Offi	cial Form 106J-2, <i>Expense</i> s	s for Separate House	ehold of Debi	tor 2		
_			ciai i ciiii 1000 2, Experises	To ocparate House	chold of DCD			
2.	Do you have depend	lents? □ No						
	Do not list Debtor 1 a Debtor 2.	o not list Debtor 1 and ebtor 2. Fill out this information for each dependent Dependent's repetition 1 or Debtor 1 or De					Does dependent live with you?	
	Do not state the						□ No	
	dependents names.			Daughter			Yes	
				Son		24	□ No	
				Son			■ Yes □ No	
							☐ Yes	
							□ No	
							☐ Yes	
3.	Do your expenses in expenses of people yourself and your do	other than	■ No □ Yes					
exp	mate your expenses	as of your bank	hly Expenses ruptcy filing date unless y cy is filed. If this is a supp					
the			n government assistance i ncluded it on <i>Schedule I:</i>)			Your exp	enses	
4.	The rental or home of payments and any re		enses for your residence. In or lot.	nclude first mortgag	e 4. \$		1,150.00	
	If not included in lin	e 4:						
	4a. Real estate tax	es			4a. \$		0.00	
	4b. Property, home	owner's, or rente	er's insurance		4b. \$		0.00	
			upkeep expenses		4c. \$		0.00	
_			ndominium dues		4d. \$		0.00	
2	AUDITIONAL MORTOAGE	navments tor '	your residence , such as ho	me equity loans	5 %		0.00	

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Debtor	¹ Patricia	Cerda	Case num	ber (if known)	
6. U	tilities:				
-		/, heat, natural gas	6a.	\$	200.00
		ewer, garbage collection	6b.	\$	150.00
_		ne, cell phone, Internet, satellite, and cable services	6c.	·	393.00
	d. Other. Sp		6d.	·	0.00
_		sekeeping supplies	7.	·	400.00
		children's education costs	8.	\$	0.00
_			9.	\$	
	-	dry, and dry cleaning products and services	9. 10.	· -	0.00
		•		·	0.00
		ental expenses	11.	\$	100.00
	ransportation to not include o	Include gas, maintenance, bus or train fare.	12.	\$	200.00
		, clubs, recreation, newspapers, magazines, and books	13.	·	0.00
		tributions and religious donations	14.	· -	0.00
	nsurance.	aribations and rengious donations	14.	Ψ	0.00
		insurance deducted from your pay or included in lines 4 or 20.			
	5a. Life insur		15a.	\$	0.00
	5b. Health ins		15b.	·	0.00
	5c. Vehicle in		15c.	·	95.00
		urance. Specify:	15d.		0.00
		nclude taxes deducted from your pay or included in lines 4 or 20.	130.	Ψ	0.00
_	pecify:	ncidue taxes deducted from your pay of incidued in lines 4 of 20.	16.	\$	0.00
		lease payments:			0.00
		nents for Vehicle 1	17a.	\$	488.00
		nents for Vehicle 2	17b.	·	0.00
	7c. Other. Sp		17c.	·	0.00
	7d. Other. Sp	-	17d.	· · · · · · · · · · · · · · · · · · ·	0.00
		s of alimony, maintenance, and support that you did not report as		Ψ	0.00
		your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$	0.00
		ts you make to support others who do not live with you.		\$	0.00
	pecify:		19.	-	
		perty expenses not included in lines 4 or 5 of this form or on Scho	edule I: Yo	our Income.	
		es on other property	20a.		0.00
20	0b. Real esta	ate taxes	20b.	\$	0.00
20	0c. Property,	homeowner's, or renter's insurance	20c.	\$	0.00
		ince, repair, and upkeep expenses	20d.	\$	0.00
		ner's association or condominium dues	20e.		0.00
	ther: Specify:		21.	·	0.00
. •	ther. openly.	-		ΙΨ	0.00
2. C	alculate your	monthly expenses			
	2a. Add lines 4	•		\$	3,176.00
2	2b. Copy line 2	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
2	2c. Add line 22	2a and 22b. The result is your monthly expenses.		\$	3,176.00
	•	monthly net income.		_	
		e 12 (your combined monthly income) from Schedule I.	23a.		3,190.00
2	3b. Copy you	r monthly expenses from line 22c above.	23b.	-\$	3,176.00
_	0 - 0 -	and the same and t			
2		your monthly expenses from your monthly income.	23c.	\$	14.00
	i ne resul	It is your monthly net income.	200.	*	
4. D	o vou expect	an increase or decrease in your expenses within the year after yo	ou file this	form?	
		ou expect to finish paying for your car loan within the year or do you expect you			e or decrease because c
		e terms of your mortgage?	3-3-1		
	No.				
	Yes.	Explain here:			
	- 100.				

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Fill in this info	rmation to identify your	case:			
Debtor 1	Patricia Cerda				
	First Name	Middle Name	Last Name		
Debtor 2	To all	No. 1 II. No.			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
O#: -: -! F	400D				
Official For					
Declara	tion About a	ın Individual	Debtor's Sc	hedules	12/15
If two married p	eople are filing together	r, both are equally respo	nsible for supplying cor	rect information.	
You must file th	is form whenever vou fi	le bankruptcy schedules	s or amended schedules	. Making a false stat	ement, concealing property, or
obtaining mone	ey or property by fraud in	n connection with a banl			00, or imprisonment for up to 20
years, or both.	18 U.S.C. §§ 152, 1341, 1	519, and 3571.			
Sic	gn Below				
0.9					
Did you pa	av or agree to pay some	one who is NOT an attor	rney to help you fill out b	ankruptcy forms?	
	., o. ag pa,		,		
■ No					
□ Yes.	Name of person			Attach Ban	nkruptcy Petition Preparer's Notice.
					n, and Signature (Official Form 119)
Under pen	alty of periury. I declare	that I have read the sum	mary and schedules file	d with this declaration	on and
	re true and correct.		• • • • • • • • • • • • • • • • • • • •		
X /s/ Pat	tricia Cerda		Х		
	ia Cerda		Signature of	Debtor 2	
Signatu	ure of Debtor 1		· ·		

Date _____

Date April 21, 2017

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	in this inform	nation to identify you	r case:			
De	btor 1	Patricia Cerda First Name	Middle Name	Last Name		
	btor 2 buse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
	se number				_	Check if this is an
St Be a	as complete a	of Financial	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup additional pages, write you	
Pa	rt 1: Give D	etails About Your Ma	arital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	☐ Married■ Not mar	ried				
2.	During the la	ıst 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	' .	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat	es and territorion				ity property state or territor co, Texas, Washington and V	
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	hedule H: Your Codebtors (O	fficial Form 106H).		
Pa	t 2 Explain	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$12,861.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Case number (if known) Debtor 1 Patricia Cerda

				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	(be	oss income fore deductions and clusions)	Sources of Check all th		Gross income (before deductions and exclusions)
	last calen	dar year: December 3	31, 2016)	■ Wages, commissions, bonuses, tips		\$42,930.00	☐ Wages, obonuses, tip	commissions, s	
				☐ Operating a business			☐ Operatin	g a business	
		dar year bef December 3		■ Wages, commissions, bonuses, tips		\$43,519.00	☐ Wages, obonuses, tip	commissions,	
				☐ Operating a business			☐ Operatin	g a business	
5.	Include include and other winnings. List each s	come regard public benefi If you are fili	less of wheth it payments; Ing a joint cas ne gross inco	e during this year or the two er that income is taxable. Ex pensions; rental income; inte e and you have income that me from each source separa	amples erest; di you red	s of other income are a vidends; money collectived together, list it	alimony; child s cted from lawsu only once unde	its; royalties; ar r Debtor 1.	Security, unemployment nd gambling and lottery
				Debtor 1			Debtor 2		
				Sources of income Describe below.	eac (be	ch source fore deductions and clusions)	Sources of Describe be		Gross income (before deductions and exclusions)
Par	t 3: List	Certain Pay	ments You	Made Before You Filed for	Bankr	uptcy			
6.	□ No.	Neither De individual p During the No. Yes * Subject to	btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include o adjustment r Debtor 2 o 90 days befo Go to line 7 List below e include pay	each creditor to whom you pa editor. Do not include payme payments to an attorney for to on 4/01/19 and every 3 year r both have primarily constructions re you filed for bankruptcy, do	umer of bld purplid you aid a tot onto this bar or safter umer of bld you aid a tot aid a tot	lebts. Consumer deb pose." pay any creditor a total al of \$6,425* or more domestic support oblinkruptcy case. that for cases filed or lebts. pay any creditor a total al of \$600 or more an	al of \$6,425* or in one or more gations, such a or after the data of \$600 or model of the total amo	more? payments and s child support to the of adjustment ore?	the total amount you and alimony. Also, do it.
	One alit	la Nama cu l	•	, ,		Total amazint	A	w Mag 41.1-	
	Creditor	s Name and	Address	Dates of payme	ent	Total amount paid	Amount yo still ow		payment for

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Del	otor 1	Patricia Cerda	Document F	Cas	e number (if known)		
7.	Inside of wh	in 1 year before you filed for bankruptoers include your relatives; any general particle you are an officer, director, person in incess you operate as a sole proprietor. 11 ny.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partners more of their voting	erships of which you g securities; and ar	u are a genera ny managing a	al partner; corporations agent, including one for
		No Yes. List all payments to an insider. der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
 Within 1 year before you filed for bankruptor insider? Include payments on debts guaranteed or cos 				nents or transfer a	any property on ac	ccount of a d	ebt that benefited an
		No Yes. List all payments to an insider der's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for	this payment
Pai	rt 4:	Identify Legal Actions, Repossession	s, and Foreclosures	paid		molado oros	mor o name
9.	List a modif	in 1 year before you filed for bankrupto Il such matters, including personal injury of ications, and contract disputes. No Yes. Fill in the details.					t or custody
 Case number Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or let Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. 					d, seized, or levied?		
	Cred	litor Name and Address	Describe the Property Explain what happened		Date		Value of the property
11.	 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from yo accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. 				amounts from your		
		litor Name and Address	Describe the action the	creditor took	Date a	action was	Amount
12.	court	n 1 year before you filed for bankrupto -appointed receiver, a custodian, or ar No		rty in the possess	ion of an assigned	e for the bene	efit of creditors, a
		Yes					
	rt 5:	List Certain Gifts and Contributions					
13.	= 1	in 2 years before you filed for bankrupt No Yes. Fill in the details for each gift.	cy, did you give any gifts	with a total value	of more than \$600	0 per person'	?
	Gifts	s with a total value of more than \$600 person	Describe the gifts		Dates the gi	you gave	Value

Address:

Person to Whom You Gave the Gift and

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14.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift or			ns with a tota	Il value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo	total	Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankroor gambling?	uptcy o	r since you filed for bankruptcy, did y	you lose any	thing because of thef	t, fire, other disaster
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Includ	ribe any insurance coverage for the le the amount that insurance has paid. I ance claims on line 33 of Schedule A/B:	_ist pending	Date of your loss	Value of property lost
	t 7: List Certain Payments or Transfer		lid you or anyone else acting on you	r behalf pay o	or transfer any prope	rty to anyone you
	consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition	prepar	ing a bankruptcy petition?			
	□ No■ Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
	Law offices of Ronald D. Cumming 22600 Deer Path Lane Plainfield, IL 60544 bankruptcylawyer@sbcglobal.net	js	Attorney Fees			\$895.00
17.	Within 1 year before you filed for bankri promised to help you deal with your cre Do not include any payment or transfer tha	ditors	or to make payments to your creditor		or transfer any prope	rty to anyone who
	■ No					
	Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bank transferred in the ordinary course of yo Include both outright transfers and transfer include gifts and transfers that you have all	ur busi s made	ness or financial affairs? as security (such as the granting of a s		•	
	No Yes. Fill in the details.					
	Person Who Received Transfer Address		Description and value of property transferred	payments	any property or received or debts	Date transfer was made
	Person's relationship to you			paid in ex	change	

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Debtor 1 Patricia Cerda

19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protection)		ny property to a	self-settle	ed trust or similar device	of which you are a
	No Yes. Fill in the details.					
	Name of trust	Description and v	value of the pro	perty trans	sferred	Date Transfer was made
Pai	rt 8: List of Certain Financial Accounts, Instru	uments, Safe Deposi	t Boxes, and S	torage Unit	ts	
20.	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? Include checking, savings, money market, or o houses, pension funds, cooperatives, associated.	ther financial accou	nts; certificates	s of deposi		, ,
	Yes. Fill in the details.					
	Name of Financial Institution and La	ast 4 digits of ccount number	Type of acco	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depocash, or other valuables?				posit box or other depos	sitory for securities,	
	No Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or p	State and ZIP Code) Dlace other than your	r home within 1	year befo	re you filed for bankrupt	cy?
	■ No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or l to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
Pai	rt 9: Identify Property You Hold or Control for	Someone Else				
23.	Do you hold or control any property that some for someone.	one else owns? Incl	ude any propei	ty you bor	rowed from, are storing	for, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Pai	rt 10: Give Details About Environmental Inform	,				
For	the purpose of Part 10, the following definitions	s apply:				
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surfac	e water, ground			

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Patricia Cerda

24.	1. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
	No								
	Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	5. Have you notified any governmental unit of any release of hazardous material?								
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or admini	strative proceeding under any envir	onmental law? Include settlements a	and orders.					
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Par	11: Give Details About Your Business or Cor	nnections to Any Business							
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have any	of the following connections to any	business?					
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	☐ A member of a limited liability company	A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership								
	☐ An officer, director, or managing execu	tive of a corporation							
	☐ An owner of at least 5% of the voting or	r equity securities of a corporation							
	No. None of the above applies. Go to Part	12.							
	Yes. Check all that apply above and fill in	the details below for each business.							
	Business Name De Address	escribe the nature of the business	Employer Identification number Do not include Social Security						
		ame of accountant or bookkeeper	Dates business existed	number of fritt.					
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your bu institutions, creditors, or other parties.				ıde all financial					
	■ No □ Yes. Fill in the details below.								
	Name Address (Number, Street, City, State and ZIP Code)	ate Issued							
	,								

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Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Patricia Cerda Signature of Debtor 2 Patricia Cerda Signature of Debtor 1 Date April 21, 2017 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	ation to identify you	r c350:			
		r case.			
Debtor 1	Patricia Cerda First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	NORTHERN DIST	RICT OF ILLINOIS		
Case number					
(if known)					Check if this is an amended filing
Official For	m 108				
Statemen	t of Intenti	on for Indiv	iduals Filing	Under Chapter	r 7 12/15
			10.0.0.0	, <u> </u>	
If you are an indiv	ridual filing under ch	apter 7, you must fill	out this form if:		
creditors have	claims secured by y	our property, or			
•		and the lease has no	-		
	er is earlier, unless				for the meeting of creditors, creditors and lessors you list
	ople are filing togeth d date the form.	er in a joint case, bot	th are equally responsi	ble for supplying correct info	ormation. Both debtors must
	nd accurate as poss ur name and case n		needed, attach a sepa	rate sheet to this form. On th	ne top of any additional pages,
Part 1: List Yo	ur Creditors Who Ha	ve Secured Claims			
1. For any credito information bel	•	Part 1 of Schedule D	Creditors Who Have C	laims Secured by Property (Official Form 106D), fill in the
	ditor and the property	that is collateral	What do you intend t secures a debt?	o do with the property that	Did you claim the property as exempt on Schedule C?
	ly Financial		☐ Surrender the prop	•	■ No
name:			Retain the property		☐ Yes
Description of	2013 chevy Malik	u	Retain the property Reaffirmation Agree		☐ Yes
property	-		Retain the property		
securing debt:					•
Part 2: List Vo	ur Unovnirod Porsor	al Proporty Lossos			
	ur Unexpired Persor d personal property		in Schedule G: Executo	ory Contracts and Unexpired	Leases (Official Form 106G), fill
in the information	below. Do not list r	eal estate leases. Un	expired leases are leas	es that are still in effect; the sume it. 11 U.S.C. § 365(p)(2)	lease period has not yet ended.
Describe your ur	nexpired personal pr	operty leases		,	Will the lease be assumed?
Lessor's name:				,	□ No
Description of leas	sed			'	L NO
Property:				!	□ Yes
Lessor's name:				ſ	□ No
Description of leas	sed				LI INO
Property:				!	□ Yes
Lessor's name:				ı	□ No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Deb	otor 1	Patricia Cerda	Case number (if known)	
Dos	ccrintio	n of leased		
	perty:	ii di leaseu	☐ Yes	
	ssor's n	ame: n of leased	□ No	
	perty:	Ti di leased	☐ Yes	
	sor's n	ame: n of leased	□ No	
	perty:	11 01 100300	☐ Yes	
Lessor's name: Description of leased			□ No	
	perty:	11 01 100000	☐ Yes	
	sor's n		□ No	
	perty:	n of leased	☐ Yes	
Par	t 3:	Sign Below		
		alty of perjury, I declare that I have indinated in the same indinated is subject to an unexpired lease.	ted my intention about any property of my estate that secures a debt and any personal	
X	/s/ P	atricia Cerda	X	
		icia Cerda ature of Debtor 1	Signature of Debtor 2	
	Date	April 21, 2017	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-12497 Doc 1 Filed 04/21/17 Entered 04/21/17 08:59:53 Desc Main Document Page 52 of 57

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In r	re Patricia Cerda		Case No.				
		Debtor(s)	Chapter	7			
	DISCLOSURE OF COMP	PENSATION OF ATTOR	NEY FOR DE	BTOR(S)			
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed to accept		\$	895.00			
	Prior to the filing of this statement I have receiv			895.00			
	Balance Due		\$	0.00			
2.	\$335.00_ of the filing fee has been paid.						
3.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
4.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
5.	■ I have not agreed to share the above-disclosed co	ompensation with any other person u	nless they are memb	pers and associates of my law firm.			
	☐ I have agreed to share the above-disclosed compo						
6.	6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	 a. Analysis of the debtor's financial situation, and re b. Preparation and filing of any petition, schedules, sc. Representation of the debtor at the meeting of cred. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications of the secured creditors of the secured cr	statement of affairs and plan which a ditors and confirmation hearing, and to reduce to market value; exer ations as needed; preparation a	may be required; I any adjourned hear mption planning;	rings thereof;			
7.	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any		service:				
	<u> </u>	CERTIFICATION					
this	I certify that the foregoing is a complete statement of bankruptcy proceeding.	any agreement or arrangement for p	payment to me for re	epresentation of the debtor(s) in			
	April 21, 2017	/s/ Ronald D. Cum	mings				
Date		Ronald D. Cummir	ngs 6195972				
		Signature of Attorney Law offices of Ror		s			
		22600 Deer Path L	ane	-			
		Plainfield, IL 60544 815 782-4844 Fax					
		bankruptcylawyer					

Name of law firm

United States Bankruptcy Court Northern District of Illinois

In re	Patricia Cerda		Case No.		
		Debtor(s)	Chapter 7		
	VE	CRIFICATION OF CREDITOR I	MATRIX		
		Number o	of Creditors:	39	
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.				
Date:	April 21, 2017	/s/ Patricia Cerda			

Ally Financial P.o. Box 380901 Bloomington, MN 55438

Anthony Lombardi DDS 3011 Theodore Street Joliet, IL 60435

Anthony Lombardi DDS 3011 Theodore Street Joliet, IL 60435

Associated Radiologists of Joliet 6801 W. 73rd Street, #637 Bedford Park, IL 60499-0637

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ATI Physical Therapy Attn: Collections P.O. Box 371863 Pittsburgh, PA 15250

Belden Jewelers/Sterling Jewelers, Inc Attn: Bankruptcy Po Box 1799 Akron, OH 44309

Cab Services Inc 90 Barney Drive Joliet, IL 60435

Capital One Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Center for Brain & Nerve Disorders P.O. Box 924 Bolingbrook, IL 60440

Chase Card
Attn: Correspondence Dept
Po Box 15298
Wilmington, DE 19850

Collection Professionals 723 First Street La Salle, IL 61301-2535

Comenity Bank/Express Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Comenity Bank/nwyrk&co Po Box 182789 Columbus, OH 43218

Comenity Bank/Victoria Secret Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Comenitybank/meijer Comenity Bank Po Box 182125 Columbus, OH 43218

Comprehensive Pathology Services 26570 Network Place Chicago, IL 60673-1265

Discover Financial Po Box 3025 New Albany, OH 43054

EM Strategies LTD P.O. Box 487 Bedford Park, IL 60499-0487

Ent Surgical Consultants Ltd. 2201 Glenwood Avenue Joliet, IL 60435

ERC/Enhanced Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256

ICS/Illinois Collection Service Po Box 1010 Tinley Park, IL 60477

ICS/Illinois Collection Service Po Box 1010 Tinley Park, IL 60477

Kohls/Capital One Kohls Credit Po Box 3043 Milwaukee, WI 53201

Loyola University Medical Center P.O. Box 3021 Milwaukee, WI 53201-3021

Med Business Bureau 1460 Renaissance Dr #400 Park Ridge, IL 60068

Med Business Bureau 1460 Renaissance Dr #400 Park Ridge, IL 60068

Medicalrecov 2250 E Devon Ave Ste 352 Des Plaines, IL 60018

MM Ahsan SC 1640 Willow Circle Drive Joliet, IL 60435

OneMain Attn: Bankruptcy 601 Nw 2nd St Evansville, IN 47708 Optima Recovery Servic 6215 Kingston Pike Ste A Knoxville, TN 37950

Receivables Performance Mgmt Attn: Bankruptcy Po Box 1548 Lynnwood, WA 98036

Synchrony Bank/Amazon Attn: Bankruptcy Po Box 956060 Orlando, FL 32896

Synchrony Bank/TJX Attn: Bankruptcy Po Box 956060 Orlando, FL 32896

Synchrony Bank/Walmart Attn: Bankruptcy Po Box 956060 Orlando, FL 32896

Target C/O Financial & Retail Srvs Mailstopn BT POB 9475 Minneapolis, MN 55440

United Recovery Service, LLC 18525 Torrence Avenue Suite C-6 Lansing, IL 60438

Visa Dept Store National Bank/Macy's Attn: Bankruptcy Po Box 8053 Mason, OH 45040